

CLMC Bulletin 317 – 14.2.17

2017/18 GP Contract

As circulated last week, the GMS Contract announcements for 17/18 have finally been released. There has been a delay in getting everything finalised but the GPC have fulfilled their aim of minimum changes to enable a period of stabilisation and, hopefully, investment into general practice. The negotiated contract is certainly not a solution to the current pressures within general practice but sees a welcome move towards investing in global sum to aid sustainability. Further details on the GMS contract are covered through the links below and we are awaiting more details and guidance but headlines include:

- 31 March 2017 sees the end of Avoiding Unplanned Admissions (AUA) DES with the associated funding invested in global sum
- Introduction of new frailty identification and management requirement – to commence 1 July 2017 and awaiting detail but likely to be linked to SCR and other coding requirements with NO claim forms or reports to complete as this funding is in the core budget
- Uplift in Learning Disability DES to £140 per health check
- Extended Hours DES continues but as of 1 October 2017 practices who regularly close in core hours will not ordinarily qualify
- Fees/uplifts – entire CQC fees will be reimbursed, expenses/pay uplift of 1%, sickness reimbursement more flexible and an entitlement rather than discretionary, greater retainer scheme funding increase to cover indemnity fees and maternity payment are no longer pro-rata
- Vaccinations and Immunisations – all roll over with a few changes in 6 programmes as detailed in the NHS E link below

There are a range of other elements for which there is currently no detail as the contractual obligations will not commence until 1 July 2017 at earliest – these centre around data collection and registration of prisoners

Contract links:

[BMA contract pages](#)

[GPC FAQs](#)

[NHS E GP contract information](#)

Enhanced/Community Services

CLMC is pursuing details from both CCGs and Local Authorities and will update practices as soon as possible.

ST CCG has now shared all 17/18 specifications with CLMC, They have worked very closely with CLMC and practices to develop a specification to look at stabilising and sustaining general practice. We welcome this approach and the hard work of ST CCG in responding to general practice comments; we hope to have something positive to share with practices very soon. We continue to have regular general practice discussions on an operational and strategic level to negotiate the best possible specifications to suit everyone's needs.

With the loss of Tees valley Shared Services all **Local Authorities** will now provide their own contracts. CLMC had a positive meeting with Stockton Borough Council to discuss the services and the difficulties that may be caused by fragmenting the services across LAs. To this end, Stockton BC have taken the lead and provided the specifications for the Health Heart and Lung Health Checks for across Tees. We have provided comments and await responses.

We are awaiting a response from **HaST CCG** to clarify which specifications will continue in 17/18 and have not yet had sight of the final documents. We will continue to chase these.

Global Sum and QOF Point Value

Global sum per weighted patient will rise by 5.9% from £80.59 to £85.35 and the value of a QOF point will increase by 3.6% from £165.18 to £171.20 in 17/18. The average practice list size (CPI) rose from 7460 as at 1 January 2016 to 7732 at 1 January 2017

Type 2 Self-Assessment of Tiered Contributions 2015/16 (pension form deadline)

The Type 2 Medical Practitioner Self-Assessment of Tiered Contributions form for 2015/16 is available from the [NHS Pensions website](#). Salaried and type 2 GPs need to complete and submit this form by **28th February 2017**. Forms can be sent electronically to pcse.enquiries@nhs.net, please put 'Type 2' in the email subject line, or by post to: Primary Care Support England, PO Box 350, Darlington, DL1 9QN.

NHS GP Health Service

As advised previously, the CLMC interim GP wellbeing service has now ceased.

The nationally funded and commissioned NHS GP Health Service is now up and running for GPs and GP trainees suffering mental ill-health and addiction. The [NHS GP Health Service](#) provides free, confidential specialist mental health support for a range of conditions including:

- Common and more complex mental health conditions
- Mental health conditions relating to physical health
- Substance misuse including support for community detoxification
- Rehabilitation and support to return to work after a period of mental ill-health.

GPs and GP trainees can self-refer through a regional network of experienced clinicians and therapists across 13 areas in England.

PCSE Bulletin

The latest PCSE bulletin covers PCSE contact information, new patient registrations, redirection of older patient correspondence, current records movement process, GP payments and pensions, GP registrar reimbursements and change in performers list application process for GP registrars. All can be viewed [here](#)

GMC, My GMP and My CPD App

This new GMC app provides quick and easy access (including if you are offline) to Good Medical Practice and other ethical guidance for doctors to enable quick access to advice for any ethical issue you may be facing. You can download via the App Store or Google Play and view our FAQs at www.gmc-uk.org/guidance/MyGMP.asp. The GMC [My CPD app](#) is also free, and available in App Store and Google Play.

NHS E Managing Conflicts of Interest Guidance

NHS England published new [guidelines](#) which will be effective from 1 June 2017 and:

- Introduces common principles and rules for managing conflicts of interest
- Provides simple advice to staff and organisations about what to do in common situations
- Supports good judgement about how interests should be approached and managed.

Facebook Group for Sessional GPs

Dr Paula Wright has set up a new Facebook Group for sessional GPs in the North East for sharing information. The page is open to sessional GPs working in the North East only and can be accessed [here](#)

GMC Reports – Medical Professionalism Matters Report and The State of Medical Education and Practice Report 2016

The GMC has published two new reports. The [Medical professionalism matters](#) report is the culmination of 18 months of events and conversations with the medical profession, from GPs, consultants and trainees who work on the ground, to royal colleges, training providers and employers. A range of recommendations have been proposed by the Medical professionalism matters advisory group, in order to support doctors to deliver their best care, working in partnership with their patients. The recommendations are based on the themes that came out of the events. Further discussion can be found at www.gooddoctors.org.uk which will also contain a range of tools and resources to help doctors reflect on these issues with colleagues at a local level.

[*The state of medical education and practice in the UK*](#) published on 27 October highlights a 'state of unease' that exists within the UK medical profession and set out the GMC commitment to continuing to work with others to reform the way doctors' education and training is organised. The GMC is concerned about 'dangerous levels of alienation' among some doctors and about the impact on education and training. Despite these pressures patients should be assured that the standard of healthcare provided by doctors working in the UK remains among the best in the world.